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REQUEST

CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to: Commissioner for Patents Box RCE Washington, DC 20231

mection of information unless it displays a valid OMD control number.					
Application Number	09/882,697				
Filing Date	6/14/2001				
First Named Inventor	S. C. Goss				
Art Unit	2683				
Examiner Name	W. Cummings + J. D. Nguyer				
Attorney Docket Number	16-12-22-6-5-6-18-11-13				

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2 Submission required under 37 CFR 1.114 a. | Previously submitted Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on ______ (Any unentered amendment(s) referred to above will be entered). Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____ iii. 🗐 Other b. X Enclosed Amendment/Reply Information Disclosure Statement (IDS) Other Affidavit(s)/Declaration(s) Miscellaneous Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) b. Other Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No._____ RCE fee required under 37 CFR 1.17(e) Extension of time fee (37 CFR 1.136 and 1.17) Other b. \boxtimes Check in the amount of \$ 790, 00 c. Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become public. Credit card information should not

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
Name (Print (Type)	Werner Ulrich	Registration No. (Attorney/Agent)	30810		
Signature	Wenn Well	Date Feb. 3, 2005			

be included on this form. Provide credit card information and authorization on PTO-2038.

CERTIFICATE OF MAILING OR TRANSMISSION

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Office of the date shown	DEIOW.			
Name (Print/Type)	Werner Ulrich	•		
Signature	Warren Weid	Date	Feb. 4,2005	
				

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.

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L& IBVD city	Application Number	09/882,697	1
TRANSMITTAL	Filing Date	6 14 2001	
FORM	First Named Inventor	5, C, G055	
	Art Unit Examiner Name	2683	
(to be used for all correspondence after initial	filing)	W. Cummings & J.), Nguyen	
Total Number of Pages in This Submission	12 Attorney Docket Number	16-22-6-5-6-18-11-13	
	ENCLOSURES (Check a	ili that apply)	
Fee Transmittal Form	Drawing(s)	After Allowance Communication to T	C
Fee Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences	i
Amendment/Reply	Petition	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	ļ
After Final	Petition to Convert to a Provisional Application	Proprietary Information	
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence	ion	
Extension of Time Request	Terminal Disclaimer	Other Enclosure(s) (please Identify	
	17	,,	
Express Abandonment Request	Request for Refund	Return Receipt Postcards (2)	Ì
Information Disclosure Statement	CD, Number of CD(s)		
Certified Copy of Priority	Landscape Table on C	CD	_
Document(s)	Remarks		
Reply to Missing Parts/ Incomplete Application			ı
Reply to Missing Parts under 37 CFR 1.52 or 1.53	,		
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I hereby certify that this correspondence is be sufficient postage as first class mail in an en- the date shown below:	eing facsimile transmitted to the USP1 velope addressed to: Commissioner fo	TO or deposited with the United States Postal Service with or Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on	
Signature	Whise		\dashv
Typed or printed name Wer her	Whish Viriah	Date 2 4/05	丿

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

1002 340

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2005 80 Design filing fee

Relssue filing fee

Provisional filing fee

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SUBTOTAL (2)

"or number previously paid, if greater, For Reiswes, see above

Plant filing fee

PTO/SB/17 (10-03) Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Linder the Paperwork Reduction Act of 1995, no persons are regulaed to respond to a collection of information unless it displays a valid OMB control number. Complete if Known FEE TRANSMITTAL Application Number Filing Date for FY 2004 First Named Inventor Effective 10/01/2003. Patent fees are subject to annual revision. **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 Art Unit **TOTAL AMOUNT OF PAYMENT Attorney Docket No** FEE CALCULATION (continued) METHOD OF PAYMENT (check all that apply) 3. ADDITIONAL FEES Money Check Credit card Other None Large Entity | Small Entity Deposit Account: Fee Fee **Fee Description** Deposit Code (\$) Code Fee Paid Account 1051 130 2051 65 Surcharge - late filing fee or oath Surcharge - tate provisional filing fee or Deposit 1052 50 2052 Account Name cover sheet 1053 130 1053 130 Non-English specification The Director is authorized to: (check all that apply) 1912 2,520 For filing a request for ex parte reexamination 1812 2,520 Credit any overpayments Charge fae(s) indicated below 920° Requesting publication of SIR prior to 1804 920 1804 Charge any additional fee(s) or any underpayment of fee(s) Examiner action Charge fee(s) Indicated below, except for the filing fee Requesting publication of SIR after 1805 1,840 1805 1.840° Examiner action to the above-identified deposit account. Extension for reply within first month 1251 110 2251 FEE CALCULATION Extension for reply within second month 420 2252 1252 1. BASIC FILING FEE 475 Extension for reply within third month 1253 950 2253 Small Entity arge Entity Fee Paid Fee Description 1254 1,480 2254 740 Extension for raply within fourth month Fee Fee 1,005 Extension for reply within fifth month 1255 2.010 2255 1001 770 2001 385 Utility filing fee

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					1,330	2453	665	Petition to revive - unintentional	<u> </u>
2. EXTRA	CLAIM F	EES	FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue fee (or reissue)	L
	,	E	extra Claims below Fee Paid	1502	480	2502	240	Design issue fee	L
Total Claims		-20**	= <u> </u>	1503	640	2503	320	Plant issue fee	
Independent Claims	لــــا	- 3**	=	1460	130	1460	130	Petitions to the Commissioner	
Multiple Dep	endent		L †	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
Large Entity		_		1806	180	1806	180	Submission of Information Disclosure Stmt	
Fee Fee Code (\$)	Fee F Code (\$)	Fee Description	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	ł
1202 18	2202	8	Claims in excess of 20	1809	770	2809	385	Filing a submission after final rejection	
1201 86	2201	43	Independent claims in excess of 3	1000	,,,,	4		(37 CFR 1.129(a))	
1203 290	2203	145	Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be	
1204 86	2204	43	** Reissue independent claims		790			examined (37 CFR 1.129(b))	
			over original patent	1801	770	2801	385	Request for Continued Examination (RCE)	79.0
1205 18	2205	9	** Reissue claims in excess of 20	1802	900	1802	900	Request for expedited examination	

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1451 1,510

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165 Notice of Appeal

145 Request for oral hearing

165 Filing a brief in support of an appeal

1451 1,510 Petition to institute a public use proceeding

SUBTOTAL (3)

55 Petition to revive - unavoidable

(Complete (if explicable)) SUBMITTED BY Registration No. Telephone 0810 30 469 3575 Name (Print/Type) Ulrich Date Signature

Other fee (specify)

*Reduced by Basic Filing Fee Paid

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